

TELECONFERENCE INFORMATION SHEET

When Nutritional and Activity Changes Are Not Enough: Weight Loss Surgery in Teens
TELECAST DATE: June 7, 2006

- ☐ Yes, our local CHDP/CCS program is interested in participating in the teleconference.
- ☐ No, our local CHDP/CCS program is not interested in participating in the teleconference.

If yes, please complete the following about the local CHDP/CCS coordinator and downlink site:

Local coordinator/contact person

Name: _____
Agency/Program: _____
Mailing address: _____
E-mail: _____
Telephone Number (____) _____ Fax Number (____) _____

Information on downlink site: (Please contact Judy Sundquist if you are having difficulty with finalizing these arrangements)

Site address: _____

Number of people the site can hold: _____ Phone number at downlink site: (____) _____

Is there an outgoing line in the room or near the room that can be used for participants to call the presenters to ask questions?

☐ Yes ☐ No

Your site will be listed under the heading of California on the Children's Hospital of Alabama, Leadership Education in Adolescent Health Program website and in their pamphlet unless you decline. Please check here to decline ☐

Necessary equipment/materials

Satellite dish
Outgoing line (to call in questions)
Training room
Ability to duplicate and distribute materials (masters will be sent to you), e.g. program materials, CEU forms, attendance record

PLEASE RETURN THIS COMPLETED FORM BY FRIDAY, MARCH 24, 2005 TO:

**JUDY SUNDQUIST
CHILDREN'S MEDICAL SERVICES
Fax: (916) 327-5743
Phone: (916) 322-8785
Email: jsundqui@dhs.ca.gov**